

AMENDMENT ATTACHED
ARIZONA STATE BOARD OF HEALTH
 BUREAU OF VITAL STATISTICS
 STANDARD CERTIFICATE OF BIRTH

State File No. 181
 Registered No. 78

1. PLACE OF BIRTH

County Gila State _____
 District or Township _____ or Village _____
 City Hayden No. _____ St. _____ Ward _____

2. Full name of child Amparo Flores (If birth occurred in a hospital or institution, give its NAME instead of street and number)
 { If child is not yet named, make supplemental report, as directed.

3. Sex of Child Male To be answered ONLY in event of plural births. 4. Twin, triplet or other. _____ 5. Legitimate? Yes 6. Date of birth Dec 23, 1926
 7. Month Day Year

8. FATHER
 Full name Joaquin Flores
 9. Residence (Usual place of abode) Hayden
 If non-resident, give place and state.

10. Color or race Mex 11. Age at last birthday 35 (Years)

12. Birthplace (city or place) Pachura
 (State or county) Sonora Mex

13. Occupation labour
 Nature of Industry

14. MOTHER
 Full maiden name Adela Acosta
 15. Residence (Usual place of abode) Hayden
 If non-resident, give place and state.

16. Color or race Mexican 17. Age at last birthday 28 (Years)

18. Birthplace (city or place) Comosapa
 (State or country) Sonora Mexico

19. Occupation Housewife
 Nature of industry

20. Number of children of this mother 3 (a) Born alive and now living 3
 (Taken as of time of birth of child herein certified and including this child.) (b) Born alive but now dead _____
 (c) Stillborn _____ 21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was _____ at _____ m. on the date above stated

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

(Born alive or stillborn.)
 Signature Charles H. Hunt

Given name added from a supplemental report _____ Address Hayden Arizona
 Month, day, year

Filed Dec 24, 1926 W.D. Nash
 Registrar

Registrar

362-1223-111

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
 N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.